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MM
PATENT
2/14/03*IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Victor S. MOORE et al.) Group Art Unit: 2153
Serial No.: 09/497,836)
Filed: February 3, 2000) Examiner: Kimberly D. Flynn
For: USER INPUT BASED ALLOCATION)
OF BANDWIDTH ON A DATA LINK)

RESPONSE WITH AMENDMENT UNDER 37 C.F.R. § 1.111**VIA FACSIMILE FAX # (703) 746-7239****BOX NON-FEE AMENDMENT**

Commissioner for Patents

Washington, D.C. 20231

ATTN: Examiner Kimberly D. Flynn

Sir:

In response to the Office Action dated November 6, 2002, in connection with the above-identified application, please enter and reconsider the following amendment and remarks.

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, on 2/14/03.

Date of Transmission

Karen Taragowski
Applicant, Assignee, or Representative

Signature

2/14/03
Date

BC9-99-044

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S/N 09/497,836

DEC 15 2003
12/6/03**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of

: Atty. Docket No. BC9-99-044

Victor S. MOORE et al.

: Group Art Unit: 2153

Serial No. 09/497,836

: Examiner: Kimberly D. Flynn

Filed: February 3, 2000

: Confirmation No. 7966

For: **USER INPUT BASED ALLOCATION OF
BANDWIDTH ON A DATA LINK**

:

TRANSMITTAL**BOX NON-FEE AMENDMENT**Commissioner for Patents
Washington, D.C. 20231

SIR:

Transmitted herewith is an amendment in the above-identified application, and the following:
 No additional filing fee is required.The fee has been calculated as shown below. (*Small entity fees indicated in parentheses.*)

CLAIMS AS AMENDED						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims	Rate	Fee
Total Claims (Small Entity)	18	-	20	0	18.00 (9.00)	0
Independent claims (Small Entity)	6	-	6	0	84.00 (42.00)	0
Multiple Dependent (Small Entity)	0	-	0	0	280.00 (140.00)	0
Extension of Time Fee (Small Entity)	One Month \$110 (\$55)	Two Months \$410 (\$205)	Three Months \$930 (\$465)			0
Total						\$0.00

XX The Commissioner is hereby authorized to charge any required fees to Deposit Account No. 09-0452.

Respectfully submitted,

Date: _____

By: _____
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